ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	2-1=01
FORMALITY REVIEW	LCK	1034	4-02-01
RESPONSE FORMALITY REVIEW	HL	712	07-10-01

INDEX OF CLAIMS

✔ .... Rejected		N .... Non-elected
= .... Allowed		I .... Interference
— (Through numeral)... Canceled		A .... Appeal
÷ .... Restricted		0 .... Objected

Claim	Date			Claim	Date		Claim	Date	
Final	Original			Final	Original		Final	Original	
1				51			101		
2				52			102		
3				53			103		
4				54			104		
5				55			105		
6				56			106		
7				57			107		
8				58			108		
9				59			109		
10				60			110		
11				61			111		
12				62			112		
13				63			113		
14				64			114		
15				65			115		
16				66			116		
17				67			117		
18				68			118		
19				69			119		
20				70			120		
21				71			121		
22				72			122		
23				73			123		
24				74			124		
25				75			125		
26				76			126		
27				77			127		
28				78			128		
29				79			129		
30				80			130		
31				81			131		
32				82			132		
33				83			133		
34				84			134		
35				85			135		
36				86			136		
37				87			137		
38				88			138		
39				89			139		
40				90			140		
41				91			141		
42				92			142		
43				93			143		
44				94			144		
45				95			145		
46				96			146		
47				97			147		
48				98			148		
49				99			149		
50				100			150		

If more than 150 claims or 10 actions
staple additional sheet here

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